

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Christopher M. Herring et al.

Title: SYSTEM AND METHOD FOR CONCURRENT WIRELESS VOICE
AND DATA COMMUNICATIONS

App. No.: 09/477,876 Filed: 01/05/2000

Examiner: Soon D. Hyun Group Art Unit: 2663

Atty. Dkt. No.: 1458-P04658

Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

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**FACSIMILE COVER SHEET****DATE:** October 29, 2003**TO:** Examiner Soon D. Hyun
USPTO GPAU 2663**FAX NO.:** 703-872-9314**FROM:** Rita M. Wisor**RE U.S. App. No.:** 09/477,876, filed 01/05/2000**Applicant(s):** Christopher M. Herring et al.**Atty Dkt No.:** 1458-P04658**Title:** SYSTEM AND METHOD FOR CONCURRENT WIRELESS VOICE
AND DATA COMMUNICATION**NO. OF PAGES (including Cover Sheet):** 9**MESSAGE:**

Attached please find:

- ☒ Transmittal Form (1 pg)
☒ Response to Office Action (7 pgs)

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PTO/SB/21 (05-03)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/477,876	
	Filing Date	01/05/2000	
	First Named Inventor	Christopher M. Herring	
	Art Unit	2663	
	Examiner Name	Soon D. Hyun	
Total Number of Pages in This Submission	8	Attorney Docket Number	1458-P04658

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Rita M. Wisor, Reg. No. 41,382
Signature	<i>Rita M. Wisor</i>
Date	Oct. 29, 2003

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Signature	<i>Katrina Prati</i>
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